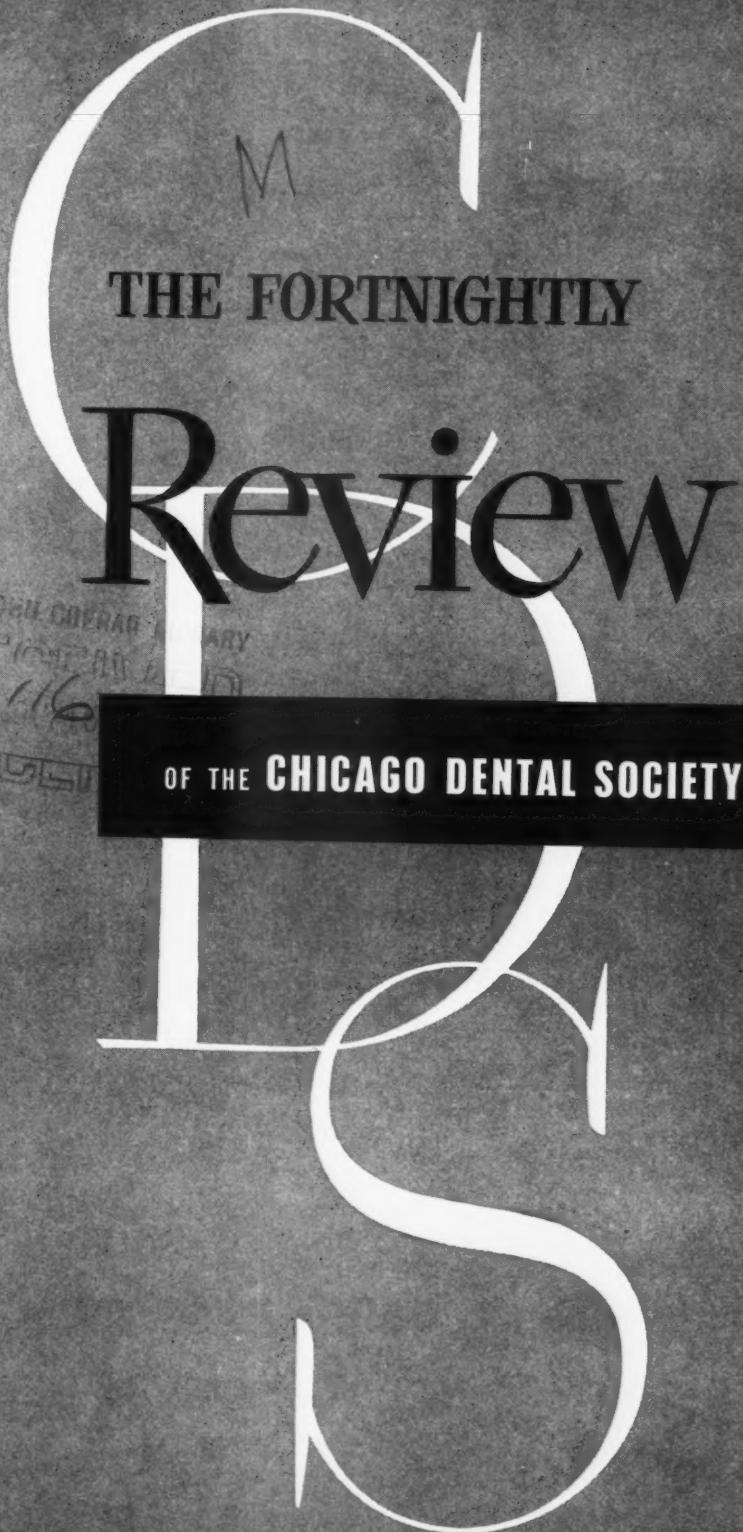


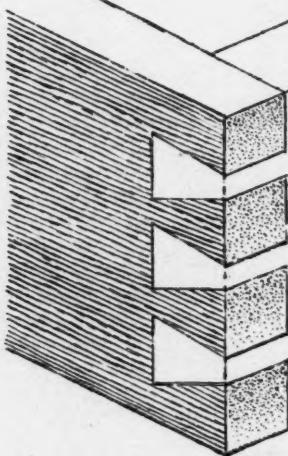
SMOOTH SAILING

NOVEMBER 15, 1954
VOL. 28 No. 10

OF THE CHICAGO DENTAL SOCIETY



A Successful Solution for Troublesome Angles in Fixed Bridgework-



*The Kennedy
Dovetail*



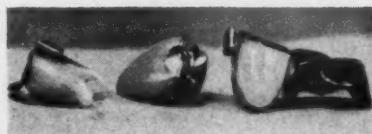
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in this moment

The prayer lingers still . . . across the table as Dad begins to serve . . . it brushes Mother's still-bowed head . . . it caresses Sally's fist as she reaches for the promised drumstick. The words of thanksgiving are being made real in this moment—gratitude from a good provider to the Great Provider . . . in this time of security together.

The most precious gift we give or receive is the gift of security. Only in a land like ours are we free to choose security as a goal of living.

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The Fortnightly REVIEW OF THE CHICAGO DENTAL SOCIETY

Number 10
Nov. 15, 1954
Volume 28

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BUSINESS MANAGER

Contributions: Manuscripts should be typewritten, double spaced, and the original copy should be submitted. Every effort will be made to return unused manuscripts, if request is made, but no responsibility can be accepted for failure to do so. Anonymous communications will receive no consideration whatever.

Manuscripts and news items of interest to the membership of the society are solicited.

Forms close on the first and fifteenth of each month. The early submission of material will insure more consideration for publication.

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THE CALENDAR

November 16: CHICAGO DENTAL SOCIETY: Regular monthly meeting will be held in the North Ballroom of the Conrad Hilton Hotel at 8:00 p.m. Mr. Anthony Olis, President of the Sanitary District of Chicago will speak on "The Water Problems of Chicagoland." Also, a special law enforcement report will be presented by Dr. Herman R. Wenger and Dr. Joseph T. Brophy.

November 17: ALPHA OMEGA FRATERNITY: Annual Clinic Day will take place at the Congress Hotel. The program is published on page 13.

November 18: CHICAGO DENTAL ASSISTANTS ASSOCIATION: Meeting in the Conference Room of the Pittsfield Building, 8:00 p.m. Dr. Russell G. Boothe will address the group on "Anesthesia and Anatomy of Oral Surgery."

November 19: NAVY DENTAL RESERVE: A joint meeting of all Dental Reserve Companies will be held at the Naval Armory, 8:00 p.m. Mr. George Murphy and Mr. Charles O'Brien will discuss "Investments." Visitors are welcome.

December 1: UNITED CEREBRAL PALSY: A meeting for dentists interested in cerebral palsy will take place at 3:30 p.m. in Room 1800 at 203 N. Wabash Avenue. Please turn to page 13 for details.

December 7: NORTH SUBURBAN BRANCH: Clinic Night at the Georgian Hotel, with dinner in the Crystal Room. The program will feature the Cooley Study Club on "Occlusion."

December 13: UNIVERSITY OF ILLINOIS COLLEGE OF DENTISTRY: The second of this season's Telephone Extension Programs. The subject will be "Problems in Control of Pain."

December 14: WEST SUBURBAN BRANCH: Regular meeting at the Oak Park Club, with dinner at 6:45 and the scientific session at 7:30. Dr. Leonard Fosdick will talk on "Caries Control."

December 15: NORTH SIDE BRANCH: Clinic Day at the Edgewater Beach Hotel. The program will be published in the December 1 issue.

"ONWARD WE STRIVE IN '55!"

90th MIDWINTER MEETING

The Chicago Dental Society

Conrad Hilton Hotel, Chicago—February 6, 7, 8 and 9, 1955

The Fortnightly REVIEW *of*

THE CHICAGO DENTAL SOCIETY

November 15, 1954

Volume 28 • Number 10

Basic Concepts of Endodontics*

I. B. Bender, D.D.S., Philadelphia, Pennsylvania

[**Editor's Note:** *The author was graduated from the School of Dentistry, University of Pennsylvania in 1930, where at the present time he is Assistant Professor in Oral Medicine. He is also Senior Attending Dental Physician at the Albert Einstein Medical Center (Eastern Division) and Instructor in Oral Surgery, Graduate School of Medicine, University of Pennsylvania.*

Dr. Bender has been awarded numerous grants for research to study the problem of post-extraction bacteremia and its relationship to heart disease. He is the author of over thirty articles dealing with problems in oral medicine. He is a member of the honorary society of Sigma Xi, American Association of Bacteriologists, American Association of Endodontists, New York Academy of Science, I.A.D.R., and A.A.A.S.]

The recent greater interest that has manifested itself in the field of endodontics could be attributed to: (1) a better understanding of the focal phenomenon; (2) a greater appreciation of the basic concepts in endodontics; (3) the application of antibiotics in the sterilization of the root canal.



Dr. Bender

or metastatic lesion derived from a primary focus of infection. It should be

stressed that a primary infectious lesion must be present before a secondary focus of infection can develop, e.g., subacute bacterial endocarditis. Briefly, the following factors must be present before a secondary or metastatic lesion can develop: (1) a primary lesion; (2) bacteria must be present in the primary lesion; (3) trauma must be introduced to disseminate the bacteria into the circulation; (4) the trauma must be great enough to produce hemorrhage so that the organisms can gain entry into the circulation; (5) a secondary or a distant lesion must be present so that the bacteria can localize themselves, as in a diseased heart valve, damaged kidney or other body tissues that have developed lesions through various organic diseases.

If any of the above factors are not present, it is inconceivable that a secondary focus can develop. While it is true that some of the bacteria may get through on a diapedetic basis, the defense

*Presented at the 1954 Midwinter Meeting of the Chicago Dental Society.

mechanism of the body, namely the phagocytes, would destroy the organisms quickly and prevent the dissemination of the bacteria. Bacteria can only break through the defense barrier of the body if there is a heavy influx of organisms and this can only occur if hemorrhage has taken place.

A tooth with an area of rarefaction that has been properly treated, showing evidence of repair with normal reossification, should not be considered as a primary focus of infection.

The basic fundamental concepts of endodontics should be reviewed so that a greater degree of success could be achieved by the profession at large. It is by understanding these problems, not the mastering of new technics, that we will improve our results.

The concept in treatment requires the following three basic fundamentals: (1) surgically clean technic with the use of the rubber dam; (2) mechanical cleansing, and (3) mechanical seal of the root canal.

The rubber dam is used to preserve a surgically clean technic and is expedient to facilitate the operation with more speed. The term *surgically clean* is suggested instead of *aseptic technic* because it is more descriptive of the procedures as used in root canal therapy. In the true sense of the word, the procedures as used are not aseptic. In an aseptic technic, gauze masks and rubber gloves would have to be used. Such a technic is advocated by Nygaard Ostby of Norway. The term *surgically clean technic* is more in keeping with the armamentarium utilized in practice by most endodontists.

The rubber dam not only helps to maintain a surgically clean field but also aids in the prevention of accidental dropping of small instruments in the mouth, particularly when working in the molar area. This is attested by the fact that bronchoscopists are occasionally called upon to remove root canal instruments that have lodged in the bronchi. All instruments that enter the root canal should be sterile especially in dealing with cases of vital pulp extirpation.

The second basic fundamental in treatment requires debridement and enlargement of the root canal. This serves three purposes: (1) it cleanses the canal of any organic tissue; (2) more antibiotic or germicide can be sealed within the canal; and (3) a larger canal can more easily be filled.

The mechanical cleansing of the root canal by means of reamers and files is the most important fundamental step in achieving success in endodontics. The enlargement not only serves for good debridement but also removes the organic tissue upon which bacteria could multiply. Besides removing the superficial layers of infected dentine, it also removes the chemical breakdown products or protein degradation which can act as an irritant like bacteria. The chemical irritation can produce an area of rarefaction at the apex just the same as bacterial irritation. It has been demonstrated in many cases exhibiting areas of rarefaction, cultures taken from canals of such teeth are sterile in 20% of the cases.

Menkin has shown that inflammatory reactions take place just as readily from chemical as from bacterial irritations. Areas of rarefaction in the apical region can be produced by bacterial, chemical or mechanical irritants. Bone and the surrounding periapical tissue cannot distinguish the nature of the irritant and its reaction to the injury is the same. Therefore, the philosophy of treatment requires not only removal of bacteria but also chemical irritants without traumatizing the apical tissue.

Areas of rarefaction are often observed in teeth having silicate restorations even though there is no exposure or underlying decay. In these instances, the pulp has degenerated from massive pulpal hemorrhage and many times the cultures are negative. The areas of rarefaction are due to the chemical irritation from the degradation of the pulp tissue and/or from the silicate cement. A similar observation can be seen in cases giving a history of a blow or fall. In these we see a tooth that has no caries or previous filling. The blow was sufficient to interfere with

the blood circulation of the pulp and an area developed that is usually detected by routine x-ray examination. These are examples of chemical irritation producing areas of rarefaction. Seldom do they develop acute flare-ups as is usually observed in cases of bacterial irritation. If there is an acute flare-up with infection, the infection may have occurred through the hematogenous route.

In these cases the debridement or the mechanical cleansing of the root canal would be sufficient to produce repair, since the etiological factor has been removed. In such cases, sterilization by antibiotics or germicides is not necessary. Whether sterilization is or is not necessary can be determined by taking a preoperative culture. We have observed in a series of over 800 cases of various diagnoses that cultures are preoperatively negative in about 40 per cent of the cases. This checks well with the findings of Ostrander and Crowley. In a study on a small number of cases (36), the mere mechanical cleansing and enlargement had rendered 20 per cent of the cases sterile that were preoperatively positive. Cases that are preoperatively negative are filled at the second visit provided there is no pain or excessive seepage of intercellular fluid.

As a result of these findings one questions the unusual importance attached to the role of sterilization. It is important, however, to bear in mind that sterilization will aid in the elimination of organisms in the positive cases much faster. Also, that many of these negative cases may be false negatives. The use of a sterilizing agent can prevent complications of infection such as pain and swelling. Pain may also ensue mechanical instrumentation of reaming, filling or overfilling, particularly in cases of vital pulp extirpation.

In order to prevent pain as a result of mechanical instrumentation, the operator should confine his instruments within the root canal. This is best obtained by determining the length of the root canal preoperatively. X-rays do not always give the true length of the tooth.

The true length is best determined in the following manner: place a root canal silver point on the tooth to be operated upon by tacking with sticky wax on the labial surface of tooth. An x-ray is taken and measurements are compared on film with the known true length of silver point. If measurements are the same, then the x-ray reveals the true length of the tooth. If the silver point is shorter on x-ray then it is foreshortened; if it is longer, the picture is elongated. The percentage of foreshortening or elongation can then be determined. Another method is that of direct proportions expressed in the following manner:

$$\frac{\text{TLS} - \text{TLT}}{\text{FLS} - \text{FLT}}$$

TL — true length
FL — false length
S — silver point
T — tooth

The true length of silver point is to the false length of silver point, as measured on x-ray, as true length of tooth (expressed as x) is to the false length of tooth, as measured on x-ray. Then by solving for x the true length of tooth can be determined. A hypothetical example is illustrated in the following manner: suppose the length of silver point when measured is 20 mm. When measured on x-ray the silver point is 22 mm. That means there is a ten per cent elongation. Therefore, if the tooth measures 25 mm. on the x-ray, its true length is 22.5 mm. Or by the formula of direct proportions it can be ex-

pressed as $\frac{20}{22} = \frac{x}{25}$ by cross multiplication

$x = 22.7$ mm. Either method can be used. This procedure is recommended for all single-rooted teeth. As a matter of caution, one millimeter is subtracted because the apical opening is not always at the extreme tip of the tooth. Many apical openings are on the side of lingual aspect of the root end. In this manner all instruments entering the root canal are predetermined as to their length by

placing rubber dam stops at the determined length.

If one attempts to instrumentate or fill beyond the apex, especially in cases of vital extirpation, complications of pain may ensue. In a number of instances an area of rarefaction or slight apical thickening can be observed after treatment. This is an example of mechanical irritation. In most cases this thickening resolves itself; in a few, resection or extraction has to be resorted to.

All instruments to be used are measured by determining the length with the use of a small piece of rubber dam as a stopper. A smooth broach of fine or medium size is introduced to explore and determine the patency of the canal. A measured barbed broach that fits loosely is introduced to remove organic tissue. The barbs on the broach are at 45 degree angles and if a large broach is introduced into the canal it could gain entry because the barbs can be compressed. However, on removal, the barbs would be caught against the walls of the canal in a reverse angle and therefore the instrument might break. The instrument should be free in the canal to prevent the complication of breakage. It should be inserted and withdrawn a little at a time to make sure that the instrument can negotiate the canal without binding.

Reaming and filing of the canal are best obtained by starting with the smallest number reamer that would fit the canal. A corresponding file number is then introduced and the canal is planed, using a downward stroke for the upper and an upward stroke for the lower teeth, in four directions, mesial, distal, lingual and labial surfaces. The next larger number instrument is then introduced and the procedure is repeated with reamer and file. The reamer is used to make room for the file. The reamer can either be used with a twirling motion or a half turn with a pull stroke. After two sizes of instruments are used the barbed broach is introduced to loosen the dental shavings that might pack in the canal. Proceed with the next size and again repeat procedure of enlarging with reamer,

planing with file and loosening the debris with barbed broach. No matter how wide the canal is at the start, it should be made wider to make certain that all the organic debris and tissue are removed. Do not skip sizes of instruments, follow the numbers in sequence, otherwise a ledge is created which is difficult to eliminate.

Irrigation with chlorinated soda and peroxide or superoxol 30 per cent is recommended in septic or discolored canals. In cases of vital extirpation, the canals can be irrigated with sterile saline or peroxide solution.

The mechanical enlargement of the canals not only serves to eliminate the debris but also reduces the length of the accessory canals, thus increasing the probability of sealing the canals. At this point the canal is dried with paper points and great care should be exercised not to force these points against any vital tissue. Mechanical irritation of the apical tissue should be kept to a minimum by measuring the paper points.

A combination of antibiotics suspension and fungicide is then sealed in the root canal. The mixture of antibiotics and fungicide is prepared in the following manner: 200 mg. each of streptomycin (chloride), chloramphenicol (chloromyctin) and sodium caprylate are placed in a sterile mortar. These powders are well triturated for 10-15 minutes. To this is added a commercially available 1 ml aqueous suspension of 300,000 units of procaine penicillin G. The entire mass is triturated again with a sterile pestle until a homogeneous mass is obtained. The suspension is then transferred with a small sterile spatula to a sterile discharged procaine carpule from which one of the rubber plungers has been removed. The paste is tapped or vibrated into the carpule. The rubber plunger is then replaced and the carpule is inserted into a standard procaine syringe. A blunt needle, such as used in discharging hydrocolloid, is attached to the syringe. The antibiotic paste is applied to the root canal by ejecting into the canal. Replace stilette in needle after use. Reamers or files are then used to bring the mate-

rial into intimate contact with the walls of the canal. In order to exercise a germicidal action, the suspension must be brought in contact with the organism. A blunt paper point is then placed in the canal to further compress the medicament against the walls of the canal. This is sealed with gutta percha and cement and the patient is dismissed for seven days. This combination of antibiotics and fungicide has been proved to be stable and effective for local use for at least one year at room temperature.

After using the foregoing combination in over 1000 cases, we have not experienced any pain or untoward reactions. One case, however, did manifest a sensitivity reaction in a patient known to be sensitive to penicillin. For those patients and dentists that are penicillin sensitive, the following formula is recommended: one gram of streptomycin, one gram of chloramphenicol and 500 mg. sodium caprylate added to two ml of propylene glycol. This is prepared and used in the same manner as described above.

While many may raise the point that the combination of antibiotics does not have a tremendous advantage over the standard germicides, it does have one particular advantage. It kills the organisms without irritating normal or inflammatory tissue. If we are going to exercise care not to injure the tissue either mechanically or chemically, then the antibiotic does have an advantage over the standard germicide in that there is no chemical injury.

Erlich's dream of killing the organism without injuring the tissue cell has finally come to fruition. Not to take advantage of such a drug is to deny the philosophy of accepted procedure of tissue sterilization.

Another advantage that antibiotics have is their penetrability. It has been shown that penicillin and streptomycin will penetrate fibrin while sulfonamides or other drugs will not. Recently Turkenkopf has shown marked diffusibility of the polyantibiotic mixture of Grossman when sealed within the confines of the root canal.

Our clinical investigations show that there is a more rapid sterilization of the infected root canals with antibiotic therapy than with standard germicides. With the use of the antibiotics we are able to start treatment of acute conditions at the first sitting and seal the canal. It has been our experience that within four to eight hours the acute symptoms subside. This we were not able to do with the use of germicides, namely cresatin, azochloramide, monochlorophenol or beechwood creosote. Treatment usually required the establishment of drainage by allowing the root canal to be opened. After the acute swelling would subside, then a germicide was sealed, thereby losing time. In many instances, even then, flare-ups would occur and drainage had to be reestablished all over again. By then both the dentist and the patient became disgusted with the result and the tooth was subjected to the treatment of tincture of cold steel, namely extraction.

Even though if it is conceded that the antibiotics do not sterilize more rapidly than the germicides, although we think that they do, they still have the advantage of not injuring the vital tissue cells. It is for this reason that we feel that healing manifests itself more rapidly. It is our clinical impression that healing takes place more rapidly because there aren't as many destroyed cells that have to be removed before healing takes place. Also because of the antimicrobial activity in the presence of fibrous tissue, the organisms that are present in the periapical tissue are readily destroyed and thus healing takes place rapidly.

Cases manifesting large areas of rarefaction in molar and anterior teeth have exhibited signs of complete reossification with restoration of a normal lamina dura in a matter of a few months with the use of antibiotics. In many instances signs of repair would manifest themselves at the end of the first or second treatment. With the use of standard germicides, signs of healing would not manifest themselves until months after treatment. On

(Continued on page 24)

Regular Meeting of the Chicago Dental Society

Conrad Hilton Hotel

October 19, 1954

The first regular meeting for the 1954-55 season was called to order by President S. R. Kleiman at 8:15 p.m.

Motion was made and regularly seconded to dispense with the reading of the minutes of the May meeting. Motion carried.

Motion was made and regularly seconded to approve the minutes of the May meeting as published in the June 15th issue of the *FORTNIGHTLY REVIEW*. Motion carried.

Dr. Kleiman introduced the following past-presidents of the Society who were present: Drs. Edwin W. Baumann, Arno L. Brett, Elmer Ebert, Harold W. Oppice and Joseph B. Zielinski.

Admiral Harris and other officers from Great Lakes, and Col. Hayden from the Fifth Army Corps were introduced by the President.

Dr. Kleiman then presented the following newly elected members: Drs. A. H. Jordon, Ralph L. Odes, Edwin Tharp and David O. Van Ort.

There were no reports of boards, standing committees or special committees.

New Business—

Secretary Hughes read the following resolutions:

"Change in Insurance Committee: Whereas: Article XIII, Section 2, Standing Committees, in the Constitution and By-Laws of the Chicago Dental Society states that 'standing committees shall be appointed by the Board of Directors, the number of personnel to be as indicated,' and Whereas: on October 19, 1954, at the regular meeting of the Board of Directors of the Chicago Dental Society, a motion was passed, in favor of establishing a regular standing committee dealing with insurance, Therefore, Be it Resolved that an Insurance Committee, composed of eight members with a chairman and vice-chairman be appointed from among the membership by the President."

According to Article VI, in order to amend the Constitution to include the Insurance Committee, notice is herewith given of the proposed change in writing at this regular meeting, at least thirty days prior to the next meeting where a two-thirds affirmative vote of the active members present is necessary for passage, and notice of this proposed change will be published in the official magazine of this Society at least ten days before the time of such meeting.

"Resolution:

"Whereas, there has been a rising demand by the peoples of this nation for some form of protection from the helplessness that often follows the misfortune of old age; and

"Whereas, the Government of the United States, also recognizing this need, has created and established by law security for millions of its citizens; and

"Whereas, the recent United States Eighty-Second Congress, while extending Social Security to over nine million additional workers, failed to include dentists and other professional citizens; and

"Whereas, the Officers and Board of Directors of the Chicago Dental Society, during the month of April 1954, caused to be mailed a survey in order to obtain an expression from its members as related to Social Security; and

"Whereas, the result that this survey showed approximately eighty per cent (80%) in favor of this protective measure; and

"Whereas, the Officers and Board of Directors of this Society, at their regular meeting today, October 19, 1954, have approved this Resolution:

"Now, Therefore, Be it Resolved, that the members of this Society, here assembled, go on record as endorsing Social Security, and recommending that our official body use every effort to obtain through legislative channels the inclusion

(Continued on page 27)

Make Your Midwinter Meeting Reservations Now!



"It was nicer than the last . . . but they're full too!"

ABSTRACTS

SELF-HARDENING RESINS

This article discusses the adverse criticisms of acrylic resins with the purpose of ascertaining whether or not these criticisms are justified. A comprehensive clinical survey of the behavior of the resins in the mouth was sought, as although there are many reports on acrylic resins, very few of them are definite clinical surveys. As a result of this study, it was concluded that the subject is rather confusing at the present time and until more is known it is recommended that the resins be used with discretion, and the results be closely observed even if it means removing and replacing a restoration. Several precautions should be noted: 1. Avoid all types of cavity where the use of acrylic resin is definitely contra-indicated by theory or experience. 2. Choose the most recently developed products known to have good color retention. 3. Follow the manufacturer's directions carefully. 4. Maintain a dry field, using rubber dam if necessary. 5. Use a suitable cavity lining.—“THE PRESENT STATUS OF SELF-HARDENING RESINS IN CONSERVATIVE DENTISTRY,” by Alan R. Docking, M.Sc. *The Dental Journal of Australia*, February, 1954.

O.C.L.

INFANTILE ACRODYNIA

Pink disease, known by at least thirty other names, including acrodynia, is not uncommon in Great Britain, and has been recorded in most parts of the world, principally in the temperate zones. This disease is an example of the way in which teeth may be affected in the course of a general bodily disturbance. In addition to other symptoms, the teeth are often shed, and teeth grinding is frequent. Rarely, as in the case described

in this article, the grinding excoriates the mandible and lays bare the germ centers of the permanent teeth with adverse effect on subsequent dentition. Another case referred to concerned a child of 2½ who lost all maxillary deciduous teeth and follicles of three permanent teeth. Pink disease affects both boys and girls, mainly during the period of primary dentition, especially between the ages of 9 and 18 months. As it frequently occurs in small epidemics it suggests an infective cause, but mercury poisoning as the cause merits the most serious consideration. For this reason the manufacturers of the proprietary teething powders are hastening to alter their formulae because of the trend of public opinion.—“PINK DISEASE,” by A. M. Nussey, M.D., F.R.C.P.Lond. *The British Dental Journal*, June 1, 1954.

O.C.L.

CLINICAL DEMONSTRATIONS USING AQUEOUS METHYL RED

The use of 0.02 per cent aqueous methyl red solution to demonstrate acid formation by mouth bacteria is a valuable aid in educating the patient in controlling dental caries. It is first necessary to give the patient a detailed explanation of the process of dental caries, describing the bacterial plaque and the changes which take place in the hard tissues, enamel, dentin and cementum. It is also important for the patient to know that the carious lesion is the hole or cavity within the tooth—the visible evidence of the effect of the carious process on the calcified tissues of the tooth. Then explain that acid production takes place when fermentable foodstuffs are acted upon by enzymatic mouth bacteria, and that this is an important part of the process. Demonstrations using aqueous

(Continued on page 32)

NEWS AND ANNOUNCEMENTS

GIVING THE LADIES WHAT THEY WANT

The ladies at the Midwinter Meeting, among others. Young Marshall Field, 'way back in 1865 when he bought into partnership with Potter Palmer in the great store that bears his name, had ideas about the shopping woman that were, in that day, unique. One revolutionary theory of his was that a woman has a right to change her mind. His intuition proved correct and his initiative and foresight guided his store through many hectic times including the Chicago Fire in 1871.

To help the ladies find what they wanted in fashion he sent the first woman buyer to the salons of Paris. Now they use the platoon system to bring the latest and smartest to Chicago shoppers and the store's counseling service aids in the selection and planning of the wardrobe for the whole feminine family contingent.

The fabulous store will again this year bring its superb Fashion Show to the new Boulevard Room of the Conrad Hilton Hotel for the Ladies' Luncheon on Tuesday noon during the Midwinter Meeting of the Chicago Dental Society.

How fortunate that Field's has always favored the ladies!

NAVY DENTAL RESERVE NEWS

The regular monthly meeting of the volunteer dental companies of the United States Naval Reserve will be held on Friday, November 19, at 8:00 p.m. sharp, at the Naval Armory, Randolph Street and the Lake. The speakers, Mr. George Murphy and Mr. Charles O'Brien, will discuss "Investments." Visitors are welcome.—*Dr. Arndt B. Nordlie, Program Officer.*

MEETING FOR THOSE INTERESTED IN CEREBRAL PALSY

An important meeting for dentists interested in cerebral palsy has been scheduled for Wednesday, December 1, at 3:30 p.m. in Room 1800 at 203 N. Wabash Avenue. Dr. Meyer Perlstein, who is Chief of the Children's Neurology Clinic at Cook County Hospital and one of the world's outstanding authorities on cerebral palsy, will meet with the dental group. Dr. Perlstein has been particularly interested in the dental needs of cerebral palsied children and his remarks should prove most illuminating and helpful.

To arrange for attendance, telephone Mr. Joseph H. Levy, Assistant Director of United Cerebral Palsy of Chicago, at FRanklin 2-2489.

ALPHA OMEGA CLINIC DAY

The Alpha Omega Dental Fraternity invites all members of the Chicago Dental Society to hear an essay and see a demonstration of the much talked about ultrasonic method of cavity preparation at the Alpha Omega Annual Clinic Day to be held at the Congress Hotel, Wednesday, November 17th, starting at 10:30 a.m. Bring some extracted teeth with you so that you will be able to try the cavitron yourself and see how it cuts enamel, dentine and amalgam.

Program

10:30 to 12 noon—Cavitron essay and demonstration.

Luncheon—Guest speaker, Dr. Carl Greenwald, who is a graduate of Chicago University and now Chairman of the State of Illinois Board of Examiners; his topic: "Functions of the Board and the Dental Practice Act."

(Continued on following page)

2:00 p.m.—Dr. John R. Thompson, Head of the Department of Orthodontia of Northwestern University; his topic: "Functional Occlusion."

3:00 p.m.—Dr. Leo Sreebny, University of Illinois; his topic, "New Theories of Calculus Formation and New Methods of Removal."

Donation for entire day, including luncheon, for members of Alpha Omega is \$5.00; non-members, \$6.00. Make checks payable to Alpha Omega Fraternity and send to Dr. Harold H. Sitron, Chairman, 7001 N. Clark St., Chicago; telephone HOllycourt 5-7313.

DR. FRANK J. ORLAND HEADS ZOLLER CLINIC

Dr. Frank J. Orland has been appointed Director of the Walter G. Zoller Memorial Dental Clinic at the University of Chicago. Dr. Orland, who has been associated with the Clinic since 1941 and with the University since 1935, succeeds Dr. J. Roy Blayney, who has retired after heading the Clinic since its founding in 1936. Dr. Blayney is continuing as director of the Evanston fluoridation study which he initiated eight years ago. Dr. Orland, who is also an Assistant Professor of Microbiology, received his dental degree from the University of Illinois and his Ph.D. in bacteriology from the University of Chicago.

U. OF I. ALUMNI INSTALL NEW OFFICERS

Dr. James N. Lynch took office as president of the University of Illinois Dental Alumni Association on October 27, succeeding Dr. Joshua S. Vission. Dr. Lynch, a 1937 graduate of the University of Illinois College of Dentistry, is in private practice in Evanston.

Installation was part of a business meeting during an all-day Homecoming program at the College of Dentistry. Dr. Eli Olech of Highland Park was chosen president-elect. A 1923 graduate of the University's College of Dentistry, Dr.

Olech is a professor of oral surgery there.

Other officers are Dr. Jeremiah Mackey '23, Waukegan, vice-president; Dr. Robert B. Underwood '44, of 4050 W. Jackson Blvd., Chicago, treasurer; and Dr. Robert Atterbury '42, Elmwood Park, secretary. Dr. James Plants '24, Evanston, was elected representative to the General Alumni Association.

C.D.A.A. NEWS

All dental assistants eligible to take the certification examination should contact Gladys Triphahn at once, either at her business address—c/o Dr. P. Thorelius, 108 N. State St., Chicago, or by telephone after 7:00 p.m., ROdney 3-7215.

Attention, Chicago area dental assistants! Wouldn't you like to enjoy the fellowship and educational advantages of membership in the Chicago Dental Assistants Association and the branch society in your community? For information, send a post card to: Miss Mary O'Donnell, Membership Chairman, Room 203, 708 Church St., Evanston, Illinois.

For a special treat, be sure to set your TV dial on Channel 2, C.B.S., at 2:30 p.m. on November 20. Five of our members will participate in a panel discussion.—*Helen Vollmer, Publicity Chairman.*

ALOH AGAIN!

In a recent statement to a FORTNIGHTLY REVIEW reporter Dr. B. Placek, Director of the Northwest Side Branch, said "*Alo oe i noho a ike ono ia Hawaii!*" (We don't know what it means either but we're working on it so watch this space for developments.)

Owed to Prominent Local Bard

Woses are wed
Wiolets are blue
The wain on the woof
Weminds me of you—
Dwip—dwip—dwip.

. . . smooth sailing!



Consolo and Melba
another feature attraction on the
DINNER DANCE AND FLOOR SHOW
the Entertainment Committee is putting together
for our Midwinter Meeting

Carl J. Madda, Chairman

NEWS OF THE BRANCHES

WEST SUBURBAN

The really big news this month is that after next fall the meetings of the branch will be at the Riverside Country Club. This will put the meetings in beautiful surroundings and as close to the geographical center of the area as is possible with all things considered. With this move there can no longer be any complaints about driving too far for some and not for others. We should all thank the officers for this bold and forward looking move. . . . The 53 men who turned out on Oct. 28 for the meeting of the Far West Suburban Study Club enjoyed the fine jokes of Mr. James Beckett and in spite of themselves learned something about the subject of wills and trusts. The next meeting of the group will be a ladies' night on Nov. 16th at the Stone Cottage, Rt. 83 and North Ave., when at 7:00 a gay night will begin with special entertainment that should delight all who come. . . . After hearing the fine lecture that Dr. Boyd is giving on Prosthetics at the Midwest Country Club everyone should prepare to come out on Dec. 14th at the Oak Park Club to get the latest report on the anti-enzyme question from Dr. Fosdick. These men are real authorities and we should all feel it our duty to be well informed on their subjects. . . . Now as to what some of the boys are doing, we have Russ Benedict who took a trip to Rhode Island and Boston seeing not only the New England Dental Society meeting at the Forsythe clinic but also managing to squeeze in a look at his son and twin grandsons. I was wondering why he was looking so proud and smoking that big black cigar the last time that I saw him. . . . That very same night Francis Fierce was smoking one of those "el ropos," no doubt to celebrate the arrival of Amy. . . . D. Browning, I am told, is going to Mich. to give the deer

thereabouts a hard time and also out after the wild "beasties" will be Don Jaeger who intends to scare a few, no doubt very few, pheasants by pointing the barrel of his gun at them and filling the air so full of buckshot they will die of heart failure. . . . Bert Pomatto informs me that nowadays he is not only banding teeth but is putting a few around his eyes with the long hours of night work he is putting in around the baby bed. . . . It's really a hard cruel world for I heard that Roy Sanden went all the way to Minn. to see the fall colors and on the week end of the big flood yet. He reports that the clouds were gray. . . . As a final tear-jerker, Frank Olson was crying on my shoulder the other night about the fact that the air-conditioner that he put in his office during the summer was finally working so that now he can keep his office a nice even 32° just like outside. . . . I wish some of the other men of the area would send me news so that I could insult their friends like I do my own.—*Bob Randolph, Branch Correspondent.*

NORTH SIDE

Only 45 days left until the major event of the North Side, Clinic Day. We already have repeat requests for the limited attendance courses from Iowa, Wisconsin and Indiana. Those fellows were here last year and want more of the same good stuff. Not too many tickets left. Come on and see the big show. Miss G. Archanna Morrison will cover every phase of your business office procedure even to your auxiliary personnel. It will be a 3-hour course, not just a clinic. Of course let's not forget Dr. Thompson with his hi-speed course, and the table clinics. Even the commercial exhibitors realize that our clinic day is such a terrific affair that they "want in." Remem-

ber your season dinner ticket is good for the luncheon on that day. See Dr. Wise for more information. . . . I am sure the best wishes of the entire North Side Branch go with Dr. Harper Hibbe who retired Oct. 1st after 37 years of good practice to live in La Jolla, California. Dr. Maurice Woodlock has taken over his offices. . . . LeRoy Levey was elected president of the English Springer Spaniel Breeders Association. . . . Wm. J. Strauss made a trip to the hospital but is now back at work. . . . Best of luck to Ernie Swartz who was out of his office for 5 months but is back at work. "Take it easy, Doc." . . . Let us hope at this printing that the delegates at the A.D.A. meeting, who will have met by this time, will think in terms of being a representative body that expresses the will of the rank and file of dentistry, not just opinions of the few.—*Joseph W. Gordon, Branch Correspondent.*

WEST SIDE

With the passing of Halloween and the November elections, we find that the season for masquerading has closed for the public and politicians. Our friend, Al Sells, did a little "politicking" and was very keen about a candidate named Keane. . . . One of our reliable sources informs us that Sam Rakow, while losing at poker to the boys, is making up the deficit with the ponies. . . . On the other hand, Robert Bailey is losing both ways; therefore, your correspondent is concerned and is on the lookout for a horseshoe or good luck charm to present him with, so that his luck may change. . . . George Barnes is heading for the Florida sunshine and by the time this issue is released he probably will be sporting a fine tan. . . . The reserved Sam Kretshmer has been highly enthused after hearing the "Tales of Harry Rubens," a former west side member who has traveled far and wide covering approximately 31 countries. . . . Harry Bernstein has moved into the 4010 building on Madison Street. . . . Recovering

from an accident is Art Tessler's boxer dog who soon will be back to normal and ready to put the gloves on again. . . . William Bingaman has taken to the sport of skeet shooting so as to sharpen up his sights for the hunting season. It has been rumored that an S.O.S. has been passed around via the grapevine throughout Walt Disney's animal land alerting all to beware of "BANG-A-MAN" Bingaman. . . . Josh Vission has been relieved of his extracurricular activity as chairman of the University of Illinois Alumni after their affair on October 27th. The west side boys are proud of the job he has done for his Alma Mater. Yes, now Vission can spend more time with his family viewing television. . . . As this article goes to press, we are fortunate to report that on Halloween Day both our Chicago professional football teams played some real pranks on their opponents. The Chicago Cardinals and Bears went into their games having their faces masked with bull dog determination. This threw a scare into their league leading opponents resulting in a surprising double victory for the Chicago teams. . . . Your correspondent wishes to thank the Walter Winchells who have uncovered much of the news for this column. Signing off for the present.—*Frank J. Kropik, Branch Correspondent.*

ENGLEWOOD

Just in case it might have slipped by some of our readers, I would like to report (maybe I'm wrong) but there seems to be going on a slight verbal tiffle between a certain correspondent of another branch (like North Suburban) and a certain correspondent of Englewood. I won't say what his name is but he is rather an author of Pomes. It was claimed that our hero must be an Indian because he is greeted by his friends with upraised arm with open palm extending outward and the guttural expression, "H'ya Waska." Of course our hero has no choice but to parry the thrust and lunge back with—

— P E R M —

(Owed to Longfellow)

BY the shore of Lake the Mich-y,
By the shining Bourbon-and-Water,
On the floorway, keeping his wig warm,
On the pleasant soft-pine flooring,
H'ya-Waska lay and hated.

IN these days of Pup-Puss-Verink,
Master mind of evil mischief,
Fearing H'ya-Waska's wisdom,
And his love for En-gul-wood,
Jealous of their faithful friendship,
And their noble words and actions,
Made at length a league against them.
H'ya-Waska, wise and wary,
Often sed to En-gul-wood,
“O my brothers! do not leave me,
Lest the Pup-Puss-Verink harm you!”

FULL of wrath was H'ya-Waska,
When he read of North Suburban,
Found the whul gang in confusion,
Heard of all the misdemeanors,
All the malice and the mischief
Of the cunning Pup-Puss-Verink.
Through his false teeth did he mutter
Words of anger and resentment,
Hot and humming, like a hornet.
“I will fix this Pup-Puss-Verink,
Bop this mischief-maker!” sed he.
“Not so long and wide the world is,
Not so rude and rough the way is,
That my wrath shall not attain him,
That my vengeance shall not reach him!”

FAR and wide among the Branches
Spreads the fame of H'ya-Waska;
No man dares strive with H'ya-Waska.
No man competes with H'ya-Waska.
But the mischievous Pup-Puss-Verink,
He the envious wittle Jerk,
Plots and conspires now against him.
“If this hateful Pup-Puss-Verink,” say they,
“If this dumb outrageous fellow
Goes on thus a wittle wonger,
Tearing everything he touches,
Rending everything to pieces,
Filling all the world with wonder,
What becomes of H'ya-Waska?
Who will care for H'ya-Waska? HELP!!

—*Injun Wo*
(and *me* a Certified Czech!)

And now for a bit of news. . . . Chas. Andreas is very happy and thankful. Mrs. Andreas underwent very serious surgery and came through fine. . . . Reuben Anderson has had a trip to Passavant Hospital for a short stay, just a routine check-up. . . . Bill Rowan, like Chas. Andreas, is happy to have his wife back from the hospital. . . . The Buckleys have a new member in the family. Don't know whether it's a boy or girl but mama is fine and daddy is beaming. . . . Harold and Mrs. Hayes attended the convention in Miami and will be gone about 10 days. Goldhorn, Van Dam, Starshak, Milas, Mike Walsh and Vermeulen also planned to attend. . . . O. E. Johnson visited his daughter and two grandchildren at LaSalle, Ill. . . . T. P. Cavanaugh played golf at Atlanta. . . . Malcolm Brooks went to Springfield for the Dental Health meeting and boy! did it rain! . . . Which reminds me, yours truly, (that's me) and my bow and arrow were hunting deer up at Republic, Mich. and for seven days straight it rained. I hit my deer all right but got lost in the woods in that daw-gone rain. I got so wet and stayed wet for so long that I won't have to take a bath for six months. . . . Finley and Borgerding were gun-hunting for deer up in Canada and both got their deer. . . . Tanis and Hilton were lucky pheasant hunting in So. Dakota. . . . And now as a member of the Law and Legislative Committee of the Chicago Dental Society, I would like you to know that this is the hardest working committee on which I have ever served. The task is enormous and the strength and resources of the opponents seem limitless. Dentists, don't make the task harder by patronizing illegal laboratories! Check yours and make sure you are dealing with an ethical one. Then do not embarrass them by sending patients to the laboratory. Every case should have a complete prescription, including your name, the patient's name, sex, approximate age, tooth shade, etc., and complete instructions as to just what work you want done. Your laboratory will appreciate it and it will help them, it will

help you, it will help the L&L Committee, it will help dentistry and it will help—help—HELP—I'm getting sleepy. Please go read something else.—*Marion B. Hopkins, Assistant Branch Correspondent.*

NORTH SUBURBAN

We may throw clams and slams, and generally refer to a certain branch correspondent as an irksome jerksome, leucamelous literary libertine, but we do so on a date line and signed copy, not in the malicious maligning manner of the following anonym which refers to the October 15 issue. Quote, "Dear Sir: I note with extreme pleasure that your Dr. Edward J. Sullivan has finally stepped in to correct the pitiable situation existing in the Branch News of the FORTNIGHTLY REVIEW. I refer to the column of the Englewood branch, and by his recognition of the need of collaboration, Dr. Sullivan has rendered us all a distinct service. The immediate improvement was obvious and most welcome. Sincerely, "A FRIEND" (not a "bad" one)." Close quote—just love these characters who take a swing at a fellow in the dark, and from behind his back. . . . Hope this doesn't infringe on your territory Dr. EDITOR, as a piece of editorializing. . . . Now that we've got the windows open to let out the fetid air, let's see what we have in the way of news. . . . Biggest item of conversation, naturally, is the convention in Miami. It seems only a few of us will be left in town during the first two weeks or so of November. Everyone, practically everyone, is hitting the road for the sunny south and the big doings, and with the concurrent discussions on the imminent election we have found virtually nothing that comes under the heading of Branch News. . . . Seems, however, that Russ Johnson has his finger in a LOT of news. He, Carl Gieler, L. B. Bowles, and George Howell attended the Sanders Dental Research Group seminar at Lake Lawn, Delavan, Wisconsin, October 12

through 14, also that Russ collaborated with Dr. W. O. Vopata in demonstrating and discussing the Hydrocolloid Technique at the Lake County Dental Society meeting, November 1, at Hank's Restaurant. Dr. John Anderson presented a demonstration of the high speed cutting technique on this same program, and Dr. Herbert C. Gustavson demonstrated the portable Vacudent and its application to the high speed technique. We also learned that Russ spent the homecoming weekend at Michigan State University with son Rudd who is a freshman in Police Administration. . . . The Northwest Highway Dental Study Group had their largest turn-out at their October 26th meeting—54 for dinner, and a lecture on Dental Economics by Jim Plants. . . . Had late lunch last Sunday at The Nautical Inn, and discovered Hilary Marcin and his lovely wife, lunching with three of their charming daughters, the fourth daughter, we learned, is enrolled at Marquette—a regular Eddie Cantor in our midst. Show this family of yours off more often, old man—mighty pleasant picture. . . . The Chicago Association of Orthodontists held a testimonial dinner at the Bismarck Hotel October 25 in honor of our own Charlie Baker. Charlie has been in active practice more than fifty years. Congratulations, Charlie. . . . ANOTHER ANONYMOUS NOTE—we don't mind getting this kind, in fact would be DELIGHTED to get hundreds with news items such as these. . . . Russ Ephland is moving from his beautiful ranch-type home in Park Ridge to a brand new two-story job in the Country Club section of Park Ridge. . . . John Ronning, a former member of North Suburban, has returned from military service to open a new bungalow office in Hinsdale. . . . Bob Kent attended the Colorado State Dental Convention in Colorado Springs, and won the exhibitors' FIRST PRIZE (\$90.00 in merchandise)—nice work, friend Bob. . . . Gordon Howard, and Tom Gruber held open house in their new building on Greenbay Road, Kenil-

(Continued on page 28)

DIRECTORY CHICAGO DENTAL SOCIETY

Central Offices: 30 N. Michigan Ave., Chicago 2, Ill., Phone RAndolph 6-4076

Kindly address all communications concerning business of the Society to the Central Office.

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Ethics Committee

Sol A. Shiret	1955
Edmund B. Kirby	1956
Eugene M. Stearns	1957

Applications for Membership

The following applications have been received by the Ethics Committee: Any member having information relative to any of the applicants, which would affect their membership, should communicate in writing with Sol A. Shiret, 25 E. Washington St. Anonymous communications or telephone calls will receive no consideration.

Applicants

BEITER, GERALD R. (St. Louis U. 1952) North Suburban, 307 Washington St., Waukegan. Endorsed by H. J. McKean and Clyde M. Enoch

(Continued on page 32)

Classified Advertising

FOR SALE

Dental Equipment bought, sold and rebuilt: In our new plant, new and rebuilt equipments on display at all times. Modern cabinets, any color—\$278.00—new x-rays—full line of new American sterilizers—student discounts. Serving the dental profession 53 years. **Gerow Dental Equipment Co., 2147 N. Lincoln Ave., Diversey 8-8300.**

For Sale: Thriving practice—only dentist in Northwest suburb, next to Chicago. Modern equipment. Best offer. Call Superior 7-7088.

For Sale: Excellent opportunity, Northwest Side—two-chair office, modern equipment, x-ray, Power chair. Excellent location, thirty years of practice. Reasonable. Phone Tuesdays and Fridays, CApital 7-0015—other days, PEnsacola 6-8438.

For Sale: Established modern well equipped dental office on ground floor in northwest suburb outside Chicago. Reasonable. Address X-17, The Fortnightly Review of the Chicago Dental Society.

For Sale: Brand new Hanau Hydrocolloid unit; never used. Priced to sell. Call DIckens 2-2929.

For Sale: Dental office, established practice, with equipment. North Side. Reasonable rent. Elevator building. Excellent transportation. Same 'phone 25 years. Leaving city; must sacrifice. SHeldrake 3-8477.

For Sale: 1 150-lb. plaster hopper, 1 Thompson Hydrocolloid outfit, 1 electric inlay furnace, 1 Ney Magnilite. Telephone RAndolph 6-5830.

For Sale: Well equipped dental office, excellent location on first floor. For information, call PALisade 5-3137.

For Sale in Illinois: Combination dental office and residence in small but fast growing industrial town, surrounded by rich farming. Very large growing area including several towns without any dentist. Fully equipped, modern, all Ritter two-chair air-conditioned office with x-ray. Gas heat throughout. Located near business area and school. Good income; low overhead. Owner called to service. Address X-18, The Fortnightly Review of the Chicago Dental Society.

For Sale: Established two-chair office and practice on far Northwest Side. Reasonable in price. Leaving state. Address X-23, The Fortnightly Review of the Chicago Dental Society.

For Sale: Dr. Donald J. McDaniel's oral surgeon's office. Loop—31 N. State St., Suite 906. Immediate possession. Telephone: Days, RAndolph 6-1493; evenings, MIdway 3-5481.

DENTAL OFFICE: Excellent downtown Woodstock location. Rental, \$75.00 per month. Four-room. New equipment. Can be purchased on monthly terms if desired. GEORGE B. HUFFMAN, McHenry County Land Company, 106 Benton St., Woodstock, Ill. Phone 211.

FOR RENT

For Rent: Fully equipped dental office including use of x-ray. North exposure. Pittsfield Building. Address X-19, The Fortnightly Review of the Chicago Dental Society.

For Rent: Part time, 25 E. Washington St., completely equipped operating room, business office, laboratory and reception room. Occupancy Monday and Wednesday. \$35.00 per month. Phone DEarborn 2-2576.

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For Rent: Available February 1st in Berwyn, excellent location, newly remodeled professional building, dental office space to be partitioned and arranged to suit you. Telephone STanley 8-1072.

For Rent: MONROE BLDG., 104 South Michigan Avenue, corner Monroe St.—Attractive suite overlooking Lake Michigan, with operating room, laboratory and business office. H. F. Pocock, Room 230, HArrison 7-0260.

For Rent: One room, fully equipped, of a three-chair office on busy corner of Northwest Side of Chicago. Fine opportunity for young man. HUmboldt 6-5815.

Office for Rent: West suburb, ideal location. Owner lives in rear apartment upstairs. O. J. VonDrasek, 6401 W. 34th St., Berwyn; telephone GUnderson 4-4827.

For Rent: Office space in modern medical building, ground floor. Reception, switchboard service. Southwest Side of Chicago. Telephone LAfayette 3-1043.

FOR SALE OR FOR RENT

For Rent or Sale: Space available for dental offices or laboratory, ground floor, 24 x 50. Radiant heat. Corner location on far South Side. Excellent transportation. Telephone Mrs. Agnes Bohan, LAfayette 3-3191.

For Sale or Rent: One or two-chair office. Excellent location in western suburb. Nicely equipped. Call Lombard 1495.

WANTED TO RENT

Wanted to Rent: Dental office, part time (Wednesdays and Saturdays), near north or north side, for the practice of children's dentistry. Address X-22, The Fortnightly Review of the Chicago Dental Society.

Wanted to Rent: Fully equipped office, far northwest side, Addison, Irving or Lawrence Avenues. Two days a week—Wednesdays and Fridays. Will also consider northwest suburb. Call ARmitage 6-8492.

WANTED TO PURCHASE

Experienced dentist wants to change location in Chicago or suburb. Interested only in high-class practice. Prepared to make cash settlement. Good references. Confidential. Address X-26, The Fortnightly Review of the Chicago Dental Society.

GROUP PRACTICE

Wanted: Orthodontist for group practice. New building on Northwest Side. Many cases waiting for treatment. Address X-20, The Fortnightly Review of the Chicago Dental Society.

OPPORTUNITIES

Wanted: Associate dentist, full or part time, in South Suburban office. Address X-21, The Fortnightly Review of the Chicago Dental Society.

Wanted: Associate dentist, full time—1526 Halsted St., Chicago Heights. Excellent opportunity. Call Dr. Paul Reuben, SKYline 4-1063.

Wanted: Ethical dentist to operate my practice for a two-year period while I am in military service. Busy well-established practice. One operating room completely equipped. Dental assistant will stay. Excellent deal to the right party. Call EUclid 3-2206.

Wanted: Young dentist, recent graduate, to work full time in busy dental office. Telephone SEEley 3-3709.

Returning to Service: Wonderful immediate opportunity for good general practitioner to take over busy practice with eventual opportunity for partnership. Satisfactory arrangement will be made to right person. Located outside of Chicago. Address X-25, The Fortnightly Review of the Chicago Dental Society.

HELP WANTED

Wanted: Dental hygienist, part time preferred but would consider full time. South Side—Beverly Hills area. BEverly 8-8080.

Wanted: Dental assistant for children's practice in Highland Park. Call Highland Park 2-0439 or CEntral 6-6963.

Wanted: Dental hygienist—salary. Western suburb; new ground-floor 3-chair office. Phone Lombard 1495.

ASSOCIATIONS WANTED

DENTIST, 37 years old, desires part time or full time association. Excellent operator. Telephone—days, ROgers Park 4-0768.

Desire association with dentist having an established practice on the far Northwest Side or near suburb, with option to purchase in the near future. Address X-24, The Fortnightly Review of the Chicago Dental Society.

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SITUATIONS WANTED

DENTAL ASSISTANT—Five years' experience, references, North Suburban. Telephone Glenview 4-6291.

DENTAL ASSISTANT—This personable young woman has completed a 12-month course in Dental Nursing. In addition to her training, she has held a public contact position for 3½ years. She is slim, attractive, and most enthusiastic about her interest in the Dental Field. For further information on the above applicant and many others, call RAndolph 6-3837—**GARLAND MEDICAL PLACEMENT**—6 E. Lake St.

DENTAL HYGIENIST, experienced, desires part time position—North or Northwest Chicago or suburbs. Telephone BRiargate 4-6405.

DENTAL ASSISTANT, with five years' experience desires position in Loop area. Excellent references. Call KEystone 9-6381.

MISCELLANEOUS

HYPNOTISM INSTRUCTION: Evening Classes. Under direction of Edwin L. Baron, Ph.B. Hypnotism Institute of Chicago, 64 West Randolph Street, Chicago 1, FFranklin 2-4188.

The INSTITUTE OF MEDICAL AND DENTAL HYPNOSIS announces a series of **LIMITED ATTENDANCE** courses in Hypnodontics. The course of study occupies a minimum of 20 hours and is usually given in a 3-day period. It covers the following topics: Historical Background of Hypnosis; Hypnotizability and Suggestibility; Classification of Stages (depth) of Hypnosis; Methods of Inducing and Terminating Hypnosis; Practical Demonstrations of Clinical Use of Hypnosis; Auto-Hypnosis; Ethical Aspects in Use of Hypnosis. For further details and information, A.D.A. members may communicate with Irving Secter, D.D.S., dental advisor and instructor of the Institute, 7407 W. Irving Park Rd., Chicago 34, Ill., or phone NAtional 2-7227.

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BASIC CONCEPTS OF ENDODONTICS

(Continued from page 9)

many occasions, the areas would appear larger after treatment was completed. This was looked upon as a normal finding. A series of check-up x-rays would reveal slow progressive filling in of bone. It was not unusual to find complete repair 18 months to two years later.

We have observed that large areas of rarefaction repair just as rapidly or even more quickly under antibiotic therapy than apical curettage or resection. Seldom do we resort to apical surgery, unless the case must be finished in one sitting. Our criteria of apical surgery is that after conservative treatment, if the area does not show a reduction in size within two weeks or one month, surgery is performed.

If the tooth does not manifest any pain or discomfort and is ready to be filled, if a culture is negative, the canal is mechanically sealed with a root canal cement followed by a hard core of gutta percha or silver point.

At the present time, there is considerable controversy as to the relative merits of the use of the culture technic. Our opinion is that it is the only laboratory test that endodontists have at their command to determine whether sterility has been accomplished or if a particular technic is sterile. It is the only method that we have that can measure the comparative effectiveness of various medicaments.

From a clinical standpoint, particularly when one uses antibiotics, one or two sterilization treatments will give a negative culture in 98 per cent of the cases. So, that if a culture technic is not used, it is fairly safe that reinfection will not occur, especially if one is sure that the canal can be hermetically sealed at the apex. However, as Grossman states, not all of us can be certain that the canal is hermetically sealed. Therefore, there is a likelihood of reinfection in a small number of cases. This has been borne out by a number of cases that have demonstrated positive cultures upon re-treatment. In these instances, the areas of

rarefaction failed to heal or areas developed after treatment. Resterilization and refilling produced prompt healing.

The positive culture is more significant than the negative. A positive finding indicates that the canal has not been sterilized, while a negative culture does not necessarily mean that the canal is absolutely sterile. It is an indication that the number of bacteria are reduced to the point where the body can cope with the smaller number of organisms if they should be present. The positive culture is therefore more symbolic. It guides us as to when not to fill the canal.

An analogy can be drawn upon electrocardiographic findings. A negative electrocardiogram does not necessarily mean that a patient is free of coronary disease, especially if there is clinical evidence. A positive finding is a definite indication that cardiac disease is present. It only tells 50 per cent of the story. The same is true of the root canal culture.

While it is a fact that organisms can gain entry either by a leak in the seal or air contamination after a negative culture, it must be borne in mind that the mere presence of an organism does not constitute an infection. Dentine is very difficult to infect, especially when dry.

Clinicians who do not use the culture technic expose themselves to the criticism that they are not giving their patients maximum protection. The good results that they achieve without the use of the culture technic is based on the following facts: (1) by chance the canals are sterile to begin with; (2) with the use of antibiotics or germicides, sterilization has been accomplished in one or two treatments; and (3) they can mechanically seal the root canal.

In cases of history of rheumatic heart disease, cultures should be taken before and after sterilization treatment. In such cases, two successive negative cultures prior to filling are imperative. In routine cases, however, one negative culture is sufficient.

The canal can be filled if the tooth is clinically receptive, i.e., no pain or swelling and the culture is negative. If pain,



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swelling or marked exudate is present, under such conditions the canal should not be filled even though the culture may be negative. The clinical findings should be the guide corroborated by the laboratory findings as to when to fill the root canal.

Method of taking culture: The tooth is isolated under the rubber dam and the field of operation is swabbed with untinted tincture of metaphen followed by 70 per cent alcohol. This is dried by a blast of warm air and both solutions are reapplied and dried. The cement is removed from the tooth and the root canal exposed. The area is again sterilized twice and dried. A sterile barbed broach is used to remove the dressing from the root canal, if one is present. A fresh sterile point is inserted into the canal to cleanse the canal surface of any medicament and discarded. A paper point moistened with culture media is left in the canal at the apex for one minute. It is then transferred to a tube containing about 10 ml of brain heart infusion broth (Difco).

A strict aseptic technic should be followed in transferring the paper point to the tube containing the broth culture. The paper point should be suspended in the medium.

A more critical method of culturing is to seal the moistened paper point in the root canal for 48 hours. This would be a more accurate test of the bacteriologic condition of the canal. The usual one minute exposure may not pick up any organisms, whereas in 48 hours a more

critical sampling of the exudate is possible.

Cultures should be allowed to incubate for seven days at 37° C. This is especially so if antibiotics are used as a means of sterilization so that it may neutralize any bacteriostatic effect if any trace of the antibiotics was carried over by the paper point.

Recent studies by Dr. Seltzer and myself have demonstrated that there is a 13 per cent margin of error in our culture technic because there are no known inactivators for chloramphenicol.

The canal may be filled by any accepted method, either by overfilling with the resorbable paste as recommended by Castagnola or the method of Mygaard-Ostby, Grossman, Sommers, et al. No matter what the method may be, a hard core of gutta percha or silver point should be used in conjunction with the cements.

In cases of vital pulp extirpation, the canals should be underfilled to 1-2 mm. irrespective of what method is used.

The eradication of the irritation, be it bacterial, chemical or mechanical, will produce repair with manifestation of bone regeneration as exemplified by the x-ray. If the irritation has not been eliminated, healing will not take place.

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MINUTES

(Continued from page 10)

of dentists under the Social Security Act; and

"Be it Resolved, that this action be published in the official FORTNIGHTLY REVIEW of this Society, and marked copies be mailed to the parent societies."

No action on the above resolution was taken.

Secretary Hughes then read the following statement:

"Old Age Assistance and Social Security: The recent vote conducted by the Chicago Dental Society with regard to our being included in Social Security showed the large majority in favor of our inclusion. This vote was in the proportion of approximately 4 to 1. In keeping with these conclusions, the Board of Directors of the Chicago Dental Society, being a component of the Illinois State Dental Society, will request the Illinois State Dental Society to honor the wishes of its members in the forthcoming meeting of the House of Delegates of the American Dental Association's meeting in Miami."

President Kleiman then presented Dr. Melford E. Zinser, Chairman of the Monthly Meeting Program Committee, who in turn introduced Dr. Frank Fowler, President of the Chicago Medical Society. Dr. Fowler talked on the subject "Hanging Together or Separately." His paper was followed by a question and answer period.

Dr. Fowler was given a rising vote of thanks for his presentation.

President Kleiman then announced the November meeting program and the meeting adjourned at 10:00 o'clock.

Respectfully submitted,

L. W. M. Hughes, Secretary

A guest handed the hotel manager a bouquet of flowers. "It's for the 'phone girls," he said.

Pleased, the manager said: "Thank you, sir, thank you sir, I know they will appreciate the compliment."

"Compliment," roared the guest. "I thought they all had died."

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NEWS OF THE BRANCHES

(Continued from page 19)

worth. Another mighty plush arrangement, we hear. . . . Milt Silver put in a lot of time working for the Community Chest Drive in Highland Park. . . . According to Herman Kelder, L. Stessl, graduate of the University of Illinois, 1952, is opening in the new Medical Building at Harlem and Foster. Herman says he's single—whistle bait. What does that mean, Herman??? . . . A final thought before closing.

*Before you louse something up—
THIMK.*

—F. S. Verink, *Branch Correspondent.*

SOUTH SUBURBAN

We in South Suburban seem to be having our share of hard luck. Just recently, Jack Amram just about sawed off the end of his finger with a bench saw, and now I have news that Ezio Grossi fractured the first and second fingers of his right hand and will be out of the office for several weeks while on the mend. Of a more serious note is the question of how it will affect his golf game? . . . Taylor Bell kept himself busy week ends during the summer months up at Pistakee Bay with ten other fellows, golfing and fishing. It seems that Bell was the chef of the outfit and to be in keeping with the job, went out and bought himself one of those apron and cook hat sets. . . . I wonder how many of our

gang went down to Miami for the big A.D.A. meeting there? So far the only definite commitment I have heard about is Pete Iagmin. Folkers might have run down just to see how things are there. He goes down about every three or four months anyhow. . . . Wilbur Sadler is sporting one of the new snazzy hard-top Oldsmobiles. . . . I hope by the time this comes out that Tom Scanlan's mother will have recovered from the severe illness as of this writing. She has had quite a siege of it, and Tom knows that he has the best wishes of all the gang for her. . . . Also on the recovery list is Mrs. Dan Altier, who recently underwent a very severe operation. . . . Just about this time you guys ought to be checking the medicine cabinet at home for bicarbonate of soda and remedies of a similar nature now that Thanksgiving is just about upon us and most of us just a wee bit apt to overindulge—Just a random thought—trying to think back to my days of chemistry—does bicarb neutralize the alcohols? If some of the brighter of youse guys know the right answer, I am sure it will be appreciated by a few of us in need.—H. C. Gornstein, *Branch Correspondent.*

KENWOOD-HYDE PARK

Even though it is too late to do any campaigning as the elections are over, we want to wish Dr. John A Feaman the best in his running for one of the offices

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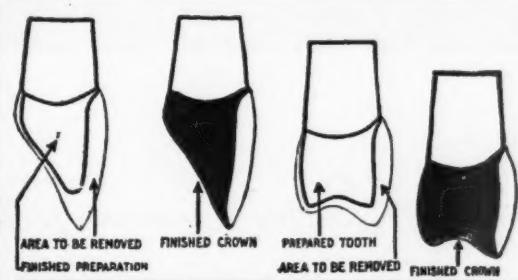
in his district. We were informed by Howard Shepard that John had been in the hospital. Say, why don't you let us know when members get into the hospital or are sick so that we can send a card or something???. . . . Speaking of the hospital, I saw Byron Tovstein the other night and he had just gotten out after having his head altered from an auto accident, no details except he is okay now. . . . It seems just like yesterday that I mentioned that Aristotle Flesser was getting married (however, it was over a year ago) and now he has a son, Tommy. We are very happy to report that both Tommy and his mother are doing very nicely and since this is the first for the Flesser family, may we extend the wish they have many more bundles of joy. . . . Sometimes our jobs sorta backfire and we are hit too. Jesse Carlton sent his son off with the rest of the drafted boys and he was sent to Little Rock to begin his career as a pin receiver. Best of luck with the new Army job. . . . Jesse has been running around giving talks again; last time he was in Pittsburgh and he will be going to Florida soon. . . . Here is some advance news about the Midwinter Meeting for the ladies: The Ladies' Luncheon Committee is headed by Mrs. Sidney Berg. They are going to have it in the Boulevard Room of the Conrad Hilton, and that isn't all, they are going to have (again) the Fashion Show put on by Field's. So you can see that they thought enough of the turnout last year to offer to do it again, so don't wait until the last second

to get those tickets. . . . The report is going around that we are going to have a good band for the Dinner-Dance so keep that ticket in mind. . . . I got caught short with not much news, but if you will just spend the price of a large coke you will help us get a lot of news. . . . Don't forget the next meeting. Dr. Patrick Toto will be the speaker and he will talk on "Oral Pathology in Relation to Denture Patients." This should prove to be a very interesting session, so don't forget to come.—W. H. Lutton, Branch Correspondent.

NORTHWEST SIDE

It seems to work that way every time. Having prophesied that the FORTNIGHTLY would not reach your office until about the 4th or 5th, what happens? The Post Office doublecrosses me and the FORTNIGHTLY was in the mail this morning, Nov. the first. I wonder if it is true that the mailman reads the mail? But it was good to get the FORTNIGHTLY on the first, so that one could see what was going on in the other branches on the first Tuesday of the month. The Northwest Branch with its movable meeting date, didn't make the Calendar of Events column. Oh, me. . . . I hope that all of you took advantage of your privilege and voted in the election, or was the percentage the same as the attendance at some of the dental

(Continued on page 32)



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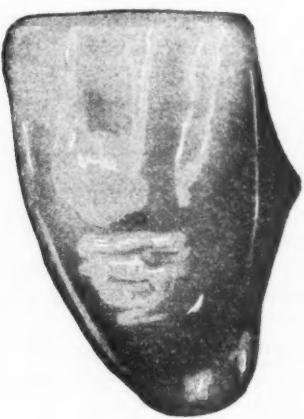
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meetings? . . . And speaking of dental meetings, the attendance at our November meeting was very gratifying to those who wonder about what has happened to our members. The terrific showing of the younger men at this meeting must have set some sort of new record for the branch. Dr. Kostrubala was the speaker of the evening. After fulsome praise on our choice of an eating place (it's a good thing that our restaurateur didn't hear him of the cost would go up), he continued on the subject of "Accidents in the Dental Office." It was a masterful presentation on the values of keeping cool under any circumstance. As our speaker so aptly put it, "You were taught how to do things, but what to do when the unexpected and unwelcome happens, that you should also know." And he proceeded to tell us. Well done, Dr. Kostrubala, come again. . . . Word by the grapevine tells us that Thad Olechowski is in town on leave. . . . Pete and Mrs. Wlodkowski were leaving by car for the ADA meeting. Vig Sorensen has been working at his duties as a member of the Examining Board of the American Society of Oral Surgeons in Miami. . . . This business of knowing who will be at the ADA can get to be quite a game. So far we have listed as going Ed Victor, he will be on the clinic program; Chet and Mrs. Stypinski, they will then make the Caribbean trip which has been sponsored by Bob Placek; Joe and Mrs. Zielinski, Joe is to be chairman of a reference committee on hospital service. . . . LeRoy Maas is moving into his new ground floor office building at Devon and Central. . . . The branch was honored by the attendance of Gus Solfronk, president-elect of the parent society. He brought greetings from the parent society, and spoke highly of the activities of the Northwesters in their support of the Midwinter Meeting. . . . The branch extends its sympathy to Arndt Nordlie on the loss of his wife. . . . And to Arthur and Hyman Elfenbaum on the loss of their sister.—*Ben Davidson, Branch Correspondent.*

ABSTRACTS

(Continued from page 12)

methyl red are described here. The presence of large masses of bacteria on the teeth is readily shown by basic fuchsin stain. Their ability to form acid is demonstrated with the aqueous methyl red. It is possible for the patient to quickly understand that dental caries may be prevented by nutritional, hygienic or therapeutic means. Using the aqueous methyl red test during recall appointments enables the operator to check the effectiveness of his educational procedures. When patients learn to clean their mouths thoroughly, especially teeth and tongue, after eating, the effectiveness of hygienic practices is quickly shown.—"CLINICAL DEMONSTRATIONS OF ACID PRODUCTION BY MOUTH ORGANISMS USING AQUEOUS METHYL RED," by Sumter S. Arnim, D.D.S., Ph.D. and J. L. Hardwick, M.D.S., Ph.D. *North-West Dentistry, May, 1954.* O.C.L.

APPLICANTS

(Continued from page 20)

BERTOLOGIO, E. M. (N.U.D.S. 1945) North Suburban, 13 E. Prospect Ave., Mt. Prospect. Endorsed by Charles H. Shaner and R. A. Seidel.

BRAMSON, LEO A. (Loyola 1926) West Side, 17 N. State St. Endorsed by Leonard J. Sherwin and Max J. Lieberman.

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LUCATORTO, FRANK M. (Loyola 1954) West Suburban, 236 E. North Ave., Northlake. Endorsed by Carl J. Madda and William B. Martin.

MASTORAKOS, LEO W. (St. Louis U. 1952) Kenwood-Hyde Park, 1525 E. 53rd St. Endorsed by Stanley R. Korf and Milton L. Braun.

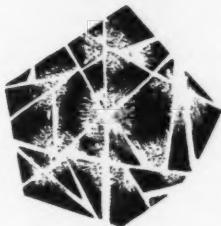
SASAMOTO, GEORGE N. (U. of Ill. 1952) North Side, 3179 N. Clark St. Endorsed by Fred F. Ohr and John Nelson.

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